PLACE OF DEATH Arizona	Territorial Board of Health
	UREAU OF VITAL STATISTICS
ORI	GINAL CERTIFICATE OF DEATH 387
DISTRICT	TERRITORIAL INDEX NO.
OR CITY HOLD NO. CLIP COLO.	COUNTY REGISTERED NO. OST. LOCAL REGISTRAR'S NO.
FULL NAME May	stitution give its NAME instead of street and number.)
PERSONAL AND STATISTICAL PARTICULARS.	
SEX	MEDICAL CERTIFICATE OF DEATH
Markien Black Chirlese WIDOWED OF DIVORCED	DATE OF DEATH (Month) 27 (Day) (Year)
DATE OF BIRTH	I hereby certify, that I attended deceased from. Afri. 26
(Month) (Day) (Year)	2/ 2/ alive
If less than 1 day,	stated above at 200 PM. The DISEASE or INJURY causing Death
CCUPATION	was as follows: Circles apoplery / /
(a) Trade, profession or particular kind of work (b) General nature of industry, business, or establishment in	
which employed (or employer)	
(State or country) Humois	Was disease contracted in Arizona? 442
MAME OF John, Hedden	If not, where?
State or country) Unknown	CONTRIBUTORY OLD agri
MAIDEN NAME OF MOTHER	(Duration) yrs mos days
BIRTHPLACE OF	(Signed) A D M. D
MOTHER (State or country) Unknown	apr. 27, 1911 (Address) Dlove, armond
HE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE	*In deaths from Violent Causes, state (1) Means of Injury; and(2) whether Accidental, Suicidal, or Homicidal.
(Informant) M. Law.	LENGTH OF RESIDENCE
11 240 A	At place of death byrs inos ds In Arizona byrs mos ds. Former or Usual Residence DENVEN.
PLACE OF BURIAL OR REMOVAL DATE OF BURIAL OR PENOVAL	File 1001 29 1911 Bry SIN
UNDEPRAFES	Filed Local Registrar
7 5000	County Registrar,